

HOUSE No. 4265

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, July 16, 2012.

The committee on Health Care Financing to whom was referred the Bill relative to financial services contracts for dental benefits corporations (House, No. 3619), reports recommending that the bill ought to pass with an amendment substituting therefor the accompanying bill (House, No. 4265).

For the committee,

STEVEN M. WALSH.

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The Commonwealth of Massachusetts

In the Year Two Thousand Twelve

An Act relative to financial services contracts for dental benefits corporations.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Section 108B of Chapter 175 of the General Laws, as appearing in the 2008
2 Official Edition, is hereby amended by inserting at the end of said section the following
3 paragraph:-

4 No contract for the provision of healthcare services or benefits with a registered dentist shall
5 require that such dentist provide dental services to a covered person at a particular fee unless said
6 dental services are services for which the company provides payment under the applicable group
7 or individual policy of accident, sickness or health insurance. Moreover, no such provision
8 shall be enforced against a dentist outside of the provider agreement with the dentist through
9 changes in the policies and procedures of the company. Fees for covered services shall be set in
10 good faith and not be nominal.

11 Section 7 of chapter 176B of the General Laws, as appearing in the 2008 Official Edition, is
12 hereby amended by inserting after the second paragraph the following paragraph:-

13 No such agreement shall require that a dentist provide dental services to subscribers or their
14 covered dependents at a particular fee unless said dental services are services for which the
15 medical services corporation provides reimbursement under the applicable service agreement.
16 Moreover, no such provision shall be enforced against a dentist outside of the provider
17 agreement with the dentist through changes in the policies and procedures of the medical
18 services corporation. Fees for covered services shall be set in good faith and not be nominal.

19 Section 7 of chapter 176E of the General Laws, as appearing in the 2008 Official Edition, is
20 hereby amended by inserting after the second paragraph the following paragraph:-

21 No written agreement between a dental service corporation and a participating dentist shall
22 require that the dentist provide dental services to subscribers or their covered dependents at a
23 particular fee unless said dental services are services for which the dental service corporation
24 provides reimbursement under the applicable service agreement. Moreover, no such provision
25 shall be enforced against a dentist outside of the provider agreement with the dentist through
26 changes in the policies and procedures of the dental service corporation. Fees for covered
27 services shall be set in good faith and not be nominal.

28 Section 21 of chapter 176G of the General Laws, as appearing in the 2008 Official Edition, is
29 hereby amended by inserting after sub-section (d) the following sub-section:-

30 (e) No contract between a health maintenance organization and a participating provider who is a
31 registered dentist shall require that such dentist provide dental services to a member at a
32 particular fee unless said dental services are services for which the health maintenance
33 organization provides reimbursement under the applicable health maintenance contract.
34 Moreover, no such provision shall be enforced against a dentist outside of the provider
35 agreement with the dentist through changes in the policies and procedures of the health
36 maintenance organization. Fees for covered services shall be set in good faith and not be
37 nominal.

38 Section 2 of chapter 176I of the General Laws, as appearing in the 2008 Official Edition, is
39 hereby amended by inserting after the first paragraph the following paragraph:-

40 No preferred provider arrangement with a health care provider who is a registered dentist shall
41 require that such dentist provide dental services to a covered person at a particular fee unless said
42 dental services are services for which the organization provides reimbursement under the
43 applicable preferred provider arrangement. Moreover, no such provision shall be enforced
44 against a dentist outside of the preferred provider contract with the dentist through the changes in
45 policies and procedures of the organization. Fees for covered services shall be set in good faith
46 and not be nominal.